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## \*BIBDATASHEET\*

CONFIRMATION NO. 6986

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/086,646	<b>FILING OR 371(c) DATE</b> 02/28/2002 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3763	<b>ATTORNEY DOCKET NO.</b> 9015.143US01
<b>APPLICANTS</b> Clinton S. Vilks, Plymouth, MN; Gail Beth Bynum, Brooklyn Park, MN; Mark Henry Faust, Lino Lakes, MN;				
<b>** CONTINUING DATA *****</b>  <b>** FOREIGN APPLICATIONS *****</b>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 03/19/2002</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 29	<b>TOTAL CLAIMS</b> 55
<b>INDEPENDENT CLAIMS</b> 11				
<b>ADDRESS</b> 23552				
<b>TITLE</b> CARTRIDGE AND ROD FOR AXIALLY LOADING MEDICATION PUMP				
<b>FILING FEE RECEIVED</b> 2472	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	